

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions and listings of claims in the application:

LISTING OF CLAIMS:

1. (currently amended): A method for diagnosis of or determination a possibility of the presence or absence of risk for or assessment of the level of the risk of cystic lung fibrosis, a possibility of a presence of risk for cystic lung fibrosis, a possibility of an increased level of a risk for cystic lung fibrosis, a severity and/or acuteness of cystic lung fibrosis, or a progress of disease for cystic lung fibrosis in humans, comprising measuring the level of native cationic antimicrobial protein of 18 kDa (CAP 18) present in a biological sample taken from a subject, CAP 18 in a biological sample, wherein the biological sample is expectoration or bronchoalveolar lavage fluid (BALF), comparing the level of said native CAP 18 in the biological sample with the level of said native CAP 18 in a control sample, and diagnosing a possibility of cystic lung fibrosis, a possibility of a presence of risk for cystic lung fibrosis, or a possibility of an increased level of the risk of cystic lung fibrosis, wherein the level of said native whereby an increase in the level of CAP 18 is measured through an antigen-antibody reaction that employs a solid phase, and wherein the measurement through antigen-antibody reaction that employs a solid phase is performed through a method comprising the following steps (a)' and (b)':

(a)': a step of bringing into mutual contact the following three components: a solid phase to which a first antibody capable of binding to a peptide having an amino acid sequence of SEQ ID NO: 1 has been immobilized, the sample, and a second antibody capable of binding to a peptide having an amino acid sequence of SEQ ID NO: 1, to thereby form a sandwich-like

complex formed of first antibody immobilized onto a solid phase-native CAP 18-second antibody:

and

(b)' a step of detecting the sandwich-like complex formed in step (a)'.

in the biological sample as compared to the control indicates a possible diagnosis of or a possible presence of risk for or increased level of risk for cystic lung fibrosis, and genotypically or phenotypically confirming the diagnosis or the determination of the presence or absence of risk or assessment of the level of the risk -

Claims 2 - 23 (**canceled**).

24. (new): The method according to claim 1, wherein the first antibody is a polyclonal antibody raised against CAP 18, and the second antibody is a monoclonal antibody raised against a peptide having an amino acid sequence of SEQ ID NO: 1.